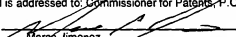
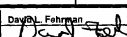
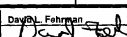
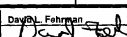


Please type a plus sign (+) inside this box → +PTO/SB/05 (11-00)
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UTILITY PATENT APPLICATION TRANSMITTAL		Attorney Docket No. 393032039700
		First Inventor Katsuchi OSAKABE
		Title OPTICAL DISK RECORDING APPARATUS CONTROLLABLE BY TABLE OF MULTI-PULSE PATTERNS
(Only for new nonprovisional applications under 37 CFR 1.53(b))		Express Mail Label No. EV147810445US
CERTIFICATE OF MAILING BY "EXPRESS MAIL"		
Express Mail Label No.: EV147810445US		Date of Deposit: July 24, 2003
<p>I hereby certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. § 1.10 on the date indicated above and is addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313.</p> <p style="text-align: center;"> Maro Jimenez</p>		

APPLICATION ELEMENTS		ADDRESS TO: Commissioner for Patents Mail Stop Patent Application P.O. Box 1450, Alexandria, VA 22313-1450																													
See MPEP chapter 600 concerning utility patent application contents.																															
<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g. PTO/SB/17) (Submit an original, and a duplicate for fee processing)</p> <p>2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p>3. <input checked="" type="checkbox"/> Specification (continued arrangement see forth below) [Total Pages 31]</p> <ul style="list-style-type: none">- Descriptive title of the invention- Cross Reference to Related Applications- Statement Regarding First sponsored R & D- Reference to sequence listing, a table, or a computer program listing appendix- Background of the invention- Brief Summary of the invention- Brief Description of the Drawings (if filed)- Detailed Description- Claim(s)- Abstract of the Disclosure <p>4. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) [Total Sheets 7]</p> <p>5. <input checked="" type="checkbox"/> Oath or Declaration [Total Pages 3]</p> <p>a. <input checked="" type="checkbox"/> Newly executed (original or copy)</p> <p>b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed)</p> <p style="margin-left: 20px;">i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(e)(2) and 1.33(b)</p> <p>6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p>	<p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)</p> <p>8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission (if applicable, see necessary)</p> <p>a. <input type="checkbox"/> Computer Readable Form (CRF)</p> <p>b. <input type="checkbox"/> Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper</p> <p>c. <input type="checkbox"/> Statements verifying identity of above copies</p> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"><p style="text-align: center;">ACCOMPANYING APPLICATION PARTS</p><p>9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))</p><p>10. <input type="checkbox"/> 37 CFR 3.73(b) Statement (where there is an assignee) <input type="checkbox"/> Power of Attorney By Assignee</p><p>11. <input type="checkbox"/> English Translation document (if applicable)</p><p>12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citation(s):</p><p>13. <input type="checkbox"/> Preliminary Amendment</p><p>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)</p><p>15. <input checked="" type="checkbox"/> Certified Copy of Priority Document (if foreign priority is claimed)</p><p>16. <input type="checkbox"/> Request and Certification under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.</p><p>17. <input type="checkbox"/> Other</p></div>																														
<p>18. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:</p> <p><input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No.:</p> <p>Prior application information: Examiner: Group / Art Unit: *</p> <p>For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. This incorporation <u>can</u> only be relied upon when a portion has been inadvertently omitted from the submitted application parts.</p>																															
<p style="text-align: center;">19. CORRESPONDENCE ADDRESS</p> <p><input checked="" type="checkbox"/> Customer Number or Bar Code Label or <input type="checkbox"/> Correspondence address below</p> <div style="border: 1px solid black; padding: 20px; text-align: center; margin: 10px 0;"><p style="font-size: 24px; margin: 0;">25224</p><p style="font-size: 10px; margin: 0;">(Insert Customer No. or Attach bar code label here)</p></div> <table border="1" style="width: 100%; border-collapse: collapse;"><tr><td colspan="2">Name David L. Fehrmann</td><td colspan="2"></td></tr><tr><td colspan="2">Address Morison & Foerster</td><td colspan="2"></td></tr><tr><td colspan="2">Address 555 W. 5th Street, 35th Floor</td><td colspan="2"></td></tr><tr><td>City Los Angeles</td><td>State CA</td><td>Zip Code 90013</td><td></td></tr><tr><td>Country US</td><td>Telephone (213) 892-5601</td><td>Fax (213) 892-5454</td><td></td></tr><tr><td>Name (Print/Type) David L. Fehrmann</td><td>Registration No. (Attorney/Agent) 28,600</td><td colspan="2"></td></tr><tr><td>Signature </td><td>Date July 24, 2003</td><td colspan="2"></td></tr></table>				Name David L. Fehrmann				Address Morison & Foerster				Address 555 W. 5th Street, 35th Floor				City Los Angeles	State CA	Zip Code 90013		Country US	Telephone (213) 892-5601	Fax (213) 892-5454		Name (Print/Type) David L. Fehrmann	Registration No. (Attorney/Agent) 28,600			Signature 	Date July 24, 2003		
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Signature 	Date July 24, 2003																														

1972 U.S. PTO
10/62644
07/24/03

**FEE TRANSMITTAL
FOR FY 2003**

Patent fees are subject to annual revision.

Compl to if Known

Application Number Not yet assigned

Filing Date Concurrently herewith

First Named Inventor Katsulchi OSAKABE

Examiner Name Not yet assigned

Group Art Unit Not yet assigned

Attorney Docket No. 393032039700

☐ Applicant Claims Small Entity Status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

(\$1042.00)

METHOD OF PAYMENT☐ Check ☐ Credit Card ☐ Money Order ☐ Other

Deposit Account Number 03-1952

Deposit Account Name Morrison & Foerster LLP

The Commissioner is authorized to: (check all that apply)

- ☒
- Charge fee(s) indicated below
- ☒
- Credit any overpayments
-
- ☒
- Charge any additional fee(s) required Under 37 CFR 1.16 and 1.17
-
- ☐
- Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account

FEE CALCULATION**1. BASIC FILING FEE**

Large	Entity	Small	Entity	Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1001	750	2001	375	Utility filing fee	750
1002	330	2002	160	Design filing fee	
1003	520	2003	260	Plant filing fee	
1004	750	2004	375	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	

SUBTOTAL (1) (\$750.00)

2. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
18	-20 = 0	x 16 = 30	
Independent Claims	6	-3 = 3	x 84 = \$252
Multiple Dependent			= \$

Large	Entity	Small	Entity	Fee Description
Fee Code	Fee (\$)	Fee Code	Fee (\$)	
1202	16	2202	8	Claims in excess of 10
1201	84	2201	42	Independent claims in excess of 3
1203	260	2203	140	Multiple dependent claims, if not paid
1204	84	2204	42	*Release independent claims over original patent
1205	16	2205	8	*Release claims in excess of 20 and over original patent

SUBTOTAL (2) (\$252.00)

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large	Entity	Small	Entity	Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1051	130	2051	65	Surcharge - late filing fee or oath	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	110	2251	55	Extension for reply within first month	
1252	410	2252	205	Extension for reply within second month	
1253	930	2253	465	Extension for reply within third month	
1254	1,450	2254	725	Extension for reply within fourth month	
1255	1,870	2255	935	Extension for reply within fifth month	
1401	320	2401	160	Notice of Appeal	
1402	320	2402	160	Filing a brief in support of an appeal	
1403	280	2403	140	Petition to institute a public use proceeding	
1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revise - unavoidable	
1453	1,300	2453	650	Petition to revise - unintentional	
1501	1,300	2501	650	Utility issue fee (or reissue)	
1502	470	2502	235	Design issue fee	
1503	630	2503	315	Plant issue fee	
1460	130	1460	130	Petitions to the Commissioner	
1607	50	1607	50	Petitions related to provisional applications	
1806	180	1806	180	Submission of Information Disclosure Sheet	
8021	40	8021	40	Recording each patent assignment per properties (times number of properties)	40
1809	750	2809	375	Filing a submission after final rejection (37 CFR § 1.129(e))	
1810	750	2810	375	For each additional invention to be examined (37 CFR § 1.129(b))	
1801	750	2801	375	Request for Continued Examination (RCE)	
1802	900	1802	900	Request for expedited examination of a design application	

Other fee (specify)

** or number previously paid, if greater; For Reissues, see above.

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$140.00)

SUBMITTED BY

Name (Print/Type)

David L. Fehrman

Registration No.
(Attorney/Agent)

28,600

Complete (if applicable)

Telephone

(213) 892-5601

Signature

[Signature]

Date

July 24, 2003

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